

An Individualized Mental Health Intervention for ASD (AIM HI) in Publicly-Funded Mental Health Services

Lauren Brookman-Frazee, Ph.D.

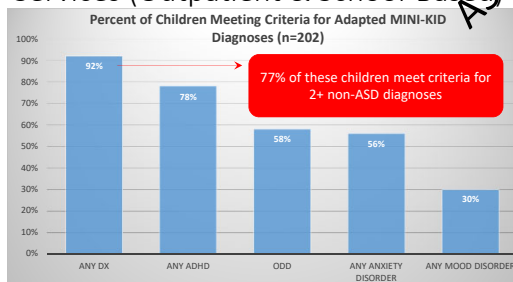
CAPTAIN Summit
November 6, 2019



Public Service Systems Caring for Children with ASD: Importance of MH Services



Psychiatric Conditions in Children Ages 5 to 13 with ASD Receiving MH Services (Outpatient & School-Based)



Brookman-Frazee, L., Stadnick, N., Chlebowski, C., Baker-Ericzen, M., & Ganger, W. (2017). Characterizing psychiatric comorbidity in children with autism spectrum disorder receiving publicly-funded mental health services. *Autism*.

Community-Identified Needs Related to Caring for Children with ASD

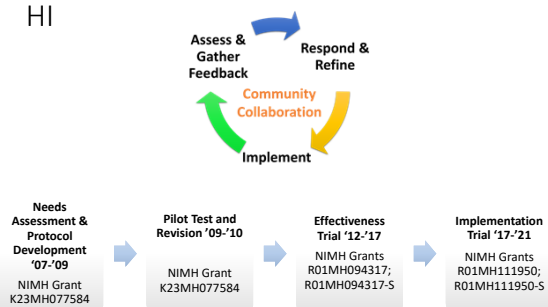


"We're probably somewhat all out of the scope of practice when we're dealing with these kids ...we don't really have a whole lot of training. We're getting it as we go."
-Community Therapist

Responding to Need for Scalable ASD Intervention and Training Model for Children's MH Services



Responding to Community-Identified Needs: Developing and Testing AIM HI



An Individualized Mental Health Intervention for Children with ASD (AIM HI)

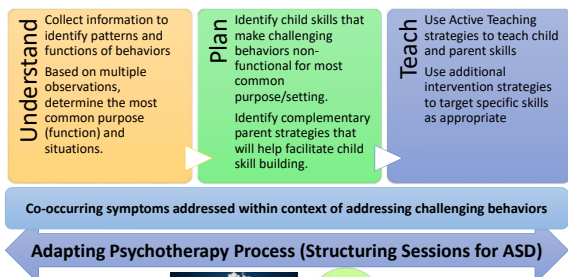
- Package of evidence-based parent-mediated and child focused strategies to reduce challenging behaviors in children with ASD ages 5 to 13 served in MH settings
 - Function-based approach to address challenging behaviors and associated psychiatric comorbid conditions
 - Individual components of intervention are “well established” and recent effectiveness trial shows evidence of full model.

Developed in collaboration with MH providers, families and ASD experts based on assessment of routine care practice, child clinical needs and provider training needs

Designed to be delivered by providers who have limited experience with ASD or behavioral interventions

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AIM HI Process



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AIM HI Process



AIM HI Protocol

Phase	AIM HI Protocol Steps	Within-Session Elements
Treatment Planning	Integrate Assessment Information	Structuring sessions for skill-building and engagement <ul style="list-style-type: none"> Schedules, visual/written materials
	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking with Parents	
	Develop Behavior Plan	
	Develop Active Teaching Plan	
Active Teaching	Teach Parent Strategies	Engaging parents and children <ul style="list-style-type: none"> Collaboration/active involvement (parents) Motivational strategies (children) Preparing to teach new skills
	Teach Alternative Skill(s) to Child	
	Promote Generalization of Alternative Skill(s)	
	Teach Additional Alternative Skills to Child (as indicated)	
Evaluating Progress	Review Treatment Progress	Active teaching with parents and children <ul style="list-style-type: none"> Modeling, practice-with-feedback, reinforcement, between-session practice
	Develop Plan for Next Steps	

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Why Focus on Challenging Behaviors?

- Types of challenging behaviors
- High rates of challenging behaviors
- Often displayed symptom of other psychiatric symptoms
- Often the most impairing symptoms
- Source of stress for families
- Primarily presenting problem in MH services

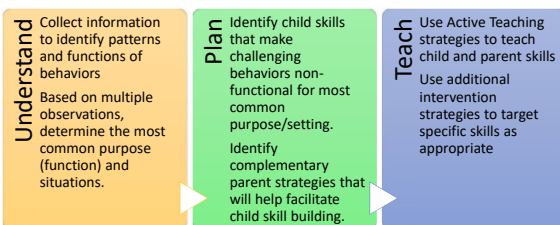
ASD Characteristics and Influences on Behaviors

- Social Communication/interactions
- Restricted, repetitive patterns of behavior, interests, activities
 - Inflexibility
 - Fixated interests
 - Hyper/hypo reactivity to sensory input
- Co-occurring emotional disorders (ADHD anxiety,)
- Motivation profile

- Challenging Behaviors
- Noncompliance
 - Aggression
 - Tantrums
 - Socially Inappropriate Behaviors
 - Withdrawal

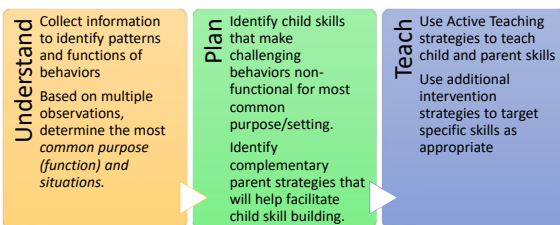
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AIM HI Framework

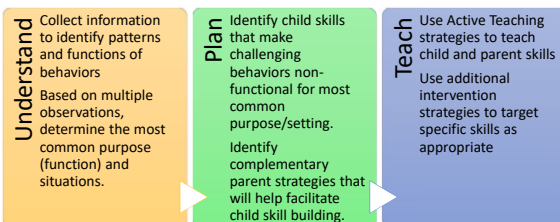


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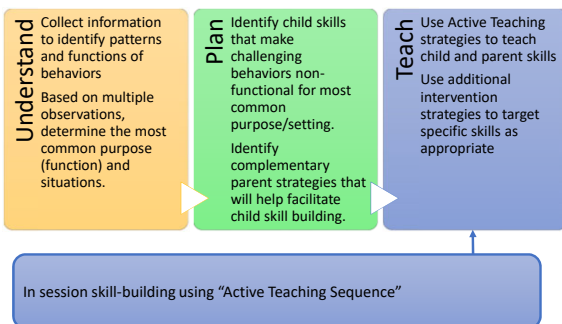


AIM HI Framework



- Child Skills: Short term skill behaviors & coping and tolerance/emotion regulation skills
- Parent Skills: Prevention strategies; skill promotion strategies (e.g., prompting, rewards), responding to challenging behaviors

AIM HI Framework



AIM HI Protocol

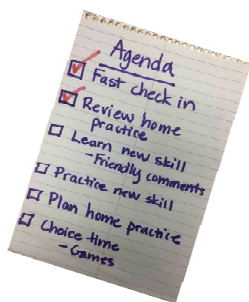
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	Collaborative ASD Psychoeducation	
	Complete Behavior Tracking	
	Develop Behavior Change Strategies	
Active Teaching	Develop Alternative Skill(s) to Child	
	Promote Generalization of Alternative Skill(s)	
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Evaluating Progress	Review Treatment Progress	
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Structuring Sessions: Session Schedule

AIM HI Session Schedule

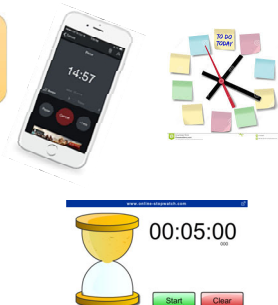
- Review what the child/parent did between sessions
- Teach parent or child skills using "Active Teaching" strategies
- Summarize session and plan between-session practice
- End with motivating activity



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Structuring Sessions: Environmental Modifications

Maximize structure and predictability

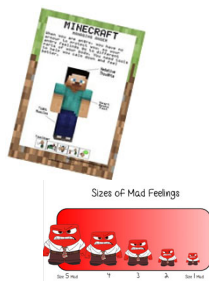


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Structuring Sessions: Environmental Modifications

Maximize structure and predictability

Use visual aids to make abstract concepts concrete



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Engaging Parents and Children: *Motivating Children*

Incorporate child
preferred activities,
topics, and interests

Share control of
materials and/or
activities with the child



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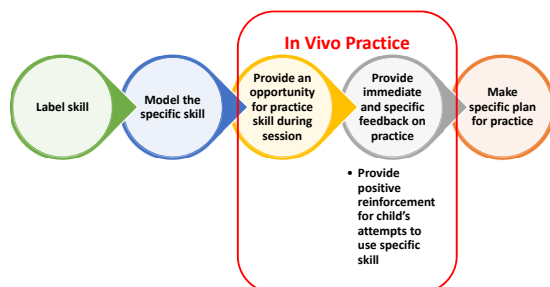
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**Adapting Psychotherapy/Counseling
for ASD**

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"Active Teaching" Sequence



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Previous AIM HI Research Findings



Training success!

- A vast majority of therapists successfully complete AIM HI certification process

Useful and effective!

- Therapists view AIM HI as useful and effective for children with (and without) ASD
- Parents are more engaged in sessions

Changing practice!

- Therapists trained in AIM HI use more evidence-based strategies
- Therapists individualize AIM HI for child/family and service setting characteristics

Improved child outcomes!

- Children's whose therapists received AIM HI training had greater improvements in behaviors compared to therapists delivering usual care

Chlebowski et al., 2018; Dyson, et al., (2018); Brookman-Frazee et al., 2019

Process of Learning AIM HI (it takes at least 6 months)

Introductory Workshop

- Understanding challenging behaviors in ASD
- Introduction to AIM HI framework & protocol steps
- Structuring session for engagement and skill building
- Start to plan how to apply concepts to AIM HI case

Structured Consultation Series (11 sessions)

- In depth coverage of protocol steps
- Case-specific discussions linked to each protocol step
- Exposure to AIM HI to different child profiles through group

Deliver AIM HI to Case with Guidance & Performance Feedback from Trainer

- Guidance on applying AIM HI to individual case
- Collaboration on the targets of intervention based on behavior patterns
- Feedback based on video and protocol form review
- Master concepts and application (by the end of the 6 months)

Considering Fit of AIM HI Training

- Currently serving children with ASD in psychotherapy/counseling?
- Program capacity to delivery EBP for this population and participate in in-depth training?
- Therapists/counselors interest in receiving EBP training?

Visit www.teamsASDstudy.org
for more information on AIM HI training
through "TEAMS" research study

Acknowledgements

- Participant partners
 - Parents
 - Therapists
 - Program leaders
- Community partners
- Co-investigators
- TEAMS Research Staff
- NIMH